PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

LC -465

1	CLAIMS AS FILED - PART I												
TOTAL CLAIMS			(Colu	(Column 1)		(Column 2)		SMALL ENTITY TYPE		OF	OTHER THAN		
11-	FOR			25				RATE	FEE		RATE		
╟			NUMBER FILED		NUMBER EXTRA		BASIC FE	E 370.0	00 OF	BASIC FE			
止	TOTAL CHARG	25	25 minus 20=		* 5		X\$ 9=	1	OR				
/	NDEPENDENT	3			*		X42=	╅—	\dashv	-	90		
Ľ	MULTIPLE DEPE	ENDENT CLAIM	PRESENT				†	7,12-	╅	OR	X84=	<u> </u>	
*	If the difference	ce in column 1 i	s less than	zero, enter	"0" in (column 2	, [+140=		OR	+280=		
		CLAIMS AS						TOTAL		OR	TOTAL	830	
_		(Column 1)		(Column 2) (Column 3)			<u>.</u>	SMALL	ENTITY	OR		R THAN ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE	
	Total Independent	*	Minus	**		=	\prod	X\$ 9=		OR	X\$18=	1 755	
	FIRST PRES	ENTATION OF M	Minus NULTIPLE D	*** EPENDENT	CLAIM	=		X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=		
								TOTAL		┨ॢ╏	TOTAL		
_		(Column 1)		(Colum	n 2)	(Column 3)	AD	DIT. FEE			ADDIT. FEE	L	
8		CLAIMS REMAINING		HIGHE NUMBI	ST				ADDI-	7 1			
AMENDMENT B	,	AFTER AMENDMENT		PREVIOU PAID F	JSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL	
	Total	*	Minus	**		=		X\$ 9=	166	1}	V010	FEE	
	Independent	*	Minus	***		=				OR	X\$18=		
	FIRST PRESE	NTATION OF M	JLTIPLE DE	PENDENT C	CLAIM			X42=		OR	X84=		
							+	140=		OR	+280=		
							ADD	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE		
		(Column 1) CLAIMS		(Column		Column 3)				- ,,			
ᇙᅡ		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU	R	PRESENT EXTRA	R		ADDI- TIONAL		RATE	ADDI- TIONAL	
	Total	*	Minus	PAID FO			\vdash		FEE			FEE	
	Independent	*	Minus	***		=	X	\$ 9=		OR	X\$18=		
△	FIRST PRESE	NTATION OF MU	ILTIPLE DE				X	42=		OR	X84=		
* If	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, onter "00"										+280=		
										OR	TOTAL		
		per Previously Paid					ound in	T. FEE the appro	opriate box	in colum	DIT. FEE L		
									. p a.c DOX	coluii	H1 7.		